

Assisting Students with Diabetes: Responding to Hypoglycemic Episodes

This training module was developed by South Carolina's School Nurse Program Advisory Committee as a guide for school nurses when training identified unlicensed assistive personnel to assist specific students with diabetes who may experience a hypoglycemic episode. Hypoglycemia, if untreated, may progress to convulsions, unconsciousness, and even death. It is therefore critical that trained responders are always available.

Prior to training unlicensed school staff, school nurses should review the South Carolina Board of Nursing Advisory #50 *"Is it within the role and scope of a licensed nurse practicing in a school setting to select, train, determine competency and evaluate unlicensed school personnel in the provision of treatments and the administration of medications required to meet a specific student's needs in the event that a medical emergency occurs when a licensed nurse is not readily available?"* located on the Board of Nursing's website at <http://www.llr.state.sc.us/POL/Nursing/index.asp?file=advisoryop.htm>.

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Goal:

To provide education and training for identified school personnel for assisting specific students with diabetes in the event of a hypoglycemic episode.

General Guidance:

(NASN, 2004, Quality Nursing Interventions in the School Setting: Procedures, Models, and Guidelines, page IV-DEL-1)

- The size of the class or training session should not include more than 3 people at a time.
- A sterile and new needle/syringe should be used for each person being trained.
- The RN (or LPN under the supervision of an RN) should draw up the sterile solution and maintain control of the syringe until the person being trained demonstrates injection technique.
- The person being trained should discard the needle/syringe into a sharps container after the practice demonstration as required in a real life situation. There should be no recapping of needles.
- In the event that a trainee receives an accidental needle stick injury provide first aid as appropriate and advise the trainee to seek medical consultation to evaluate the puncture wound for possible risk of infection and/or a tetanus booster. Per the school district's policy, the incident should be documented appropriately and workman's compensation issues addressed.

Instruction Methods:

Lecture, Discussion, Demonstration, Hands-On Practice

Recommended Training Frequency:

Following the initial training, the trainee should receive a training update at the beginning of each school year and near the middle of each school year. The registered nurse may determine that additional updates are warranted.

Materials Needed:

Applicable school district policies
School district documentation forms
Specific student's Individual Health Care Plan and Emergency Action Plan
Glucose monitor and supplies (model used by specific student)
Glucose monitor instructions (as provided by manufacturer)
Oral glucose products (as suggested on the specific student's Emergency Action Plan)
Instructions for oral glucose product (as provided by product maker or as prescribed)
Glucagon Kit (sample of kit that is available for student)

Instructions for Glucagon Kit (as provided by product maker)

Training supplies for Glucagon injections (Glucagon Trainer Kit, alcohol wipes, apple or orange for practicing injections, gloves; if no Glucagon Trainer Kit available improvise with vials of sterile water and 3 cc syringes)

Copy of test and check off sheet

Completion certificate

Two copies of all training materials and instructions (one for trainee and one for placement in trainee's file as documentation of instructions given)

Resources:

- ✓ Helping Students with Diabetes Succeed: A Guide for School Personnel (<http://www.ndep.nih.gov/diabetes/youth/youth.htm>)
- ✓ Information for the User: Glucagon for Injection (<http://pi.lilly.com/us/rglucagon-ppi.pdf>)
- ✓ Eli Lilly and Company Material Safety Data Sheet: Glucagon for Injection (http://ehs.lilly.com/msds/msds_glucagon_for_injection.html)

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Training Schedule

*Minutes noted represent an estimated length of time for each section of the training module.
Actual times may vary.*

Training Overview

5 minutes

1. Purpose
2. Contents
3. Requirements for Receiving Certificate of Completion
4. What the Certificate of Completion Means
5. School District Policies & Procedures
6. Questions / Answers

Diabetes Basics

30 minutes

1. What is diabetes?
2. What causes diabetes?
3. How is diabetes managed?
 - a. Blood Glucose Monitoring
 - b. Insulin & Oral Medications
 - c. Food – Meal Planning
 - d. Exercise & Physical Activity
 - e. Individual Health Care Plans / 504 Accommodation Plan / IEP
4. What happens if the management plan doesn't work perfectly?
 - a. Hyperglycemia
 - b. Hypoglycemia
 - c. Emergency Action Plan
5. Questions / Answers

Student Specific Instructions

15 minutes

1. Confidentiality
2. Individual Health Care Plan
3. Emergency Action Plan
4. Questions / Answers

Management of Hypoglycemia for Assigned Student

60 minutes

1. Standard Precautions
2. Glucose Monitoring
 - a. Description of Process
 - b. Instructor Demonstration of Student's Glucometer
 - c. Return Demonstration by Trainee(s)
3. Oral Management
 - a. Description of Process

- b. Instructor Demonstration Per Student's Emergency Action Plan
 - c. Return Demonstration by Trainee(s)
4. Glucagon
 - a. Material Safety Data Sheet
 - b. Description of Process
 - c. Instructor Demonstration Per Student's Emergency Action Plan
 - d. Return Demonstration by Trainee(s)
5. Scenarios / Practice Time
6. Questions / Answers

Documentation & Reporting

15 minutes

1. Forms
2. What to Document
3. Reporting Requirements
4. Questions / Answers

Written Test & Skills Check Off (*Grade test at the time of completion.*)

Suggested Standard: Trainee should score 100% on the written test and on the skills check off.

If test score and/or skills check off unsatisfactory:

Written test and the skills check off may be taken again if score is below 100% on first attempt. If either the written test or the skills check off score is below 100% on the second attempt, additional instruction may be provided and the trainee may be allowed to take the test and the check off again on another day. Trainees whose final evaluation is unsatisfactory must not be assigned to respond in the event of a hypoglycemic episode. Trainees should be advised that the student specific information shared during the training session must be kept confidential.

If test score and skills check off satisfactory:

Review Student Specific Assignment

15 minutes

1. Individual Health Care Plan
2. Emergency Action Plan
3. Schedule Time for Meeting Student (*Schedule a time for the student and the trainee to meet if the school administrator has already agreed with the assignment for the trainee. The student's parent/legal guardian should be included in the meeting if possible.*)
4. Schedule Time for Direct Observation (Glucose Monitoring)
5. Location of Medications / Supplies
6. Questions / Answers

Certificate of Completion

5 minutes

1. Review Limits
2. Review Reporting Requirements
3. Questions / Answers